



Forest Practices Application/Notification  
Office Checklist Page 1  
Northwest Region

FPA/N #: 2816330

Received Date: 4-12-18

WDFW Concurrence Due Date: —

WDFW Concurrence Review Completed: —

Comments Due Date: 4-26-18

Decision Due Date: 5-12-18

FP Forester: SKY30

Shutdown Zone: —

RMAP #: —

FPA/N CLASSIFICATION: [ ] II [X] III [ ] IVG [ ] IVS		Biomass [ ] FFFPP [ ] 20-acre exempt [ ]	
Landowner Name:	WeyCo	Project Name:	SKY spray
WRIA: Snohomish		WAW: Skykomish River	
WRIA:		WAW: Buckler River	
WRIA:		WAW: Foss River	
Legal Description: 2829-27-9E; 17-26-11E 29, 32-26-12E		County: Snohomish; King	
Activity Type: Harvest _____ ac	Spray 140 _____ ac	Stream Crossing(s) _____	
Road _____	Road _____	Rock Pit _____ ac	
Construction _____ ft	Abandonment _____ ft	Spoils _____ cy	

ALTERNATIVE PRESCRIPTIONS

- |  |   |
|--|---|
| <input type="checkbox"/> Alternate Plan                            | <input type="checkbox"/> Habitat Conservation Plan                      |
| <input type="checkbox"/> Ten-Year Forest Management Plan           | <input type="checkbox"/> Landowner Option Plan for Northern Spotted Owl |
| <input type="checkbox"/> Columbia River Gorge National Scenic Area | <input type="checkbox"/> Cooperative Habitat Enhancement Agreement      |
| <input type="checkbox"/> Watershed Analysis: _____                 |   |

RESOURCE REVIEW

- |  |  |
|--|--|
| <input type="checkbox"/> Unstable Slopes (Risk: Highway, Water; _____) | <input type="checkbox"/> Bull Trout Overlay                                |
| <input type="checkbox"/> Soils Map (Highly Erodible & Very Unstable)   | <input type="checkbox"/> HCP Bull Trout Population                         |
| <input type="checkbox"/> SLPSTAB                                       | <input type="checkbox"/> Bald Eagle nest or roost within 660 feet          |
| <input type="checkbox"/> Landslide Hazard Zonation                     | <input type="checkbox"/> Group A or B Water Supply                         |
| <input type="checkbox"/> Landslide Inventory Polygon                   | <input type="checkbox"/> Hatchery (Name: _____)                            |
| <input type="checkbox"/> Rain-on-Snow and Outside Approved WA          | <input type="checkbox"/> Even-Aged Harvest greater than 120 Acres          |
| <input type="checkbox"/> Hydric Soils                                  | <input type="checkbox"/> Ground-based Equipment on Slopes greater than 40% |
| <input type="checkbox"/> Wetland [ ] Forested, [ ] A, [ ] B            | <input type="checkbox"/> Road Construction on Slopes greater than 65%      |
| <input type="checkbox"/> In WMZ of [ ] A, or [ ] B Wetland             | <input type="checkbox"/> Saltwater Islands (Name: _____)                   |
| <input type="checkbox"/> In RMZ/ELZ of Type [ ] S, [ ] F, [ ] N water  | <input type="checkbox"/> In or Over Typed Water                            |
| <input type="checkbox"/> Water Verification                            | <input type="checkbox"/> Volume greater than 5 mbf per acre                |

ASSOCIATED NON-SCANNED DOCUMENTS – On file with the FPA/N at the Region office.

- |   |  |
|---|--|
| <input type="checkbox"/> SEPA Checklist/Documents | <input type="checkbox"/> Large Landowner Road Maintenance and Abandonment Plan |
|---|--|

ASSOCIATED SCANNED DOCUMENTS

- |   |  |
|---|--|
| <input type="checkbox"/> Conversion Option Harvest Plan       | <input type="checkbox"/> Hardwood Conversion Form                                |
| <input type="checkbox"/> FPHP Plans & Specifications          | <input type="checkbox"/> Wetland Mitigation Plan                                 |
| <input type="checkbox"/> Qualified Expert Report; Type: _____ | <input type="checkbox"/> Water Protocol Surveys                                  |
| <input type="checkbox"/> Natural Regeneration Plan            | <input type="checkbox"/> Modification Form# _____                                |
| <input type="checkbox"/> Shoreline Permit                     | <input type="checkbox"/> Water Classification Worksheet                          |
| <input type="checkbox"/> Marbled Murrelet Form                | <input type="checkbox"/> Shade Documentation (Stream Shade Assessment Worksheet) |
| <input type="checkbox"/> FPBM Appendix(s) _____               | <input type="checkbox"/> Watershed Analysis Worksheet                            |
| <input type="checkbox"/> Small Landowner RMAP Checklist       | <input type="checkbox"/> DFC Printout  |
| <input type="checkbox"/> CMZ Assessment Form                  | <input type="checkbox"/> Slope Stability Informational Form                      |

EARR Tax Credit [ ] Yes [X] No

ADDITIONAL COMMENTS:

Form completed by SKY

October, 2016 Version

### KEY FOR EVALUATION OF SITE SPECIFIC USE OF AERIALLY APPLIED PESTICIDES

Question	Question	Resp	Action
1 (a)	Is the pesticide on the pesticide list (WAC 222-16-070(1))?	<del>Yes</del> No	go to 2
1 (b)	Is the pesticide being used under a Dept of Agriculture Experimental Use Permit (WAC 16-228-1460)?	Yes <del>No</del>	go to 1(b) Class III Class IV Sp
2	Is the toxicity rating for the pesticide to be used "Danger - Poison" as designated in the pesticide list (WAC 222-16-070(1)(b))?	Yes <del>No</del>	Class IV Sp go to 3(a)
3 (a)	Is <i>Bacillus thuringiensis</i> (BT) the only pesticide being used on this application?	Yes <del>No</del>	go to 3(b) go to 4(a)
3 (b)	Is there a Threatened or Endangered species or the critical habitat (Federal) or critical habitat (State) of a species within the application area that is susceptible to the BT strain being used?	Yes <del>No</del>	Class IV Sp Class III
4 (a)	Is this operation occurring over ground water with a high susceptibility to contamination as specified in EPA 910/ 9-87-169 or in documentation provided by the department of ecology?	Yes <del>No</del>	go to 4(b) go to 5(a)
4 (b)	Is this pesticide a state restricted use pesticide for the protection of ground water under WAC 16-228-1231?	Yes No	Class IV Sp go to 5(a)
5 (a)	Is the operation adjacent (within 100 ft.) of surface water?	<del>Yes</del> No	go to 5(b) go to 5(e)
5 (b)	Determine the toxicity rating from the pesticide list: *Is the toxicity rating "Caution" or "Warning"? *Is the toxicity rating "Danger"?	<del>Yes</del> <del>Yes</del> Yes	go to 5(c) go to 5(d) Class IV Sp
5 (c)	Is there a Group A or B water surface water system (WAC 246-290-020) intake OR a fish hatchery intake within one half mile downstream of the operation?	Yes <del>No</del>	Class IV Sp go to 5(e)
5 (d)	Is there a Group A or B water surface system intake OR a fish hatchery intake within 1 mile downstream of the operation?	Yes <del>No</del>	Class IV Sp go to 5(e)
5 (e)	Is the operation within 200 feet of the intake of a Group A or B spring water system?	Yes <del>No</del>	Class IV Sp go to 5(f)
5 (f)	Is the operation applying a pesticide in a Type A or B wetland?	Yes <del>No</del>	Class IV Sp go to 6(a)
6 (a)	Does any portion of the planned operation cover 240 or more contiguous acres? Pesticide treatment units will be considered contiguous if they are separated by less than 300 feet or treatment dates of adjacent units are less than 90 days apart.	Yes <del>No</del>	Class IV Sp go to 6(b)
6 (b)	Is there a Threatened or Endangered species or the critical habitat (Federal) or critical habitat (State) of a species within the application area?	Yes <del>No</del>	Class IV Sp go to 6(c)
6 (c)	If there is a special concern identified for this pesticide in the Board manual, does it apply to this application?	Yes <del>No</del>	Class IV Sp Class III

- (1) Special concerns (see WAC 222-16-070 (2)6(c)) shall be evaluated by the department of agriculture. Information regarding special concerns shall be presented to the board for review. Approved special concerns shall be included in the board manual. Special concerns shall include situations where use of pesticides has the potential for a substantial impact on the environment, beyond those covered specifically in the key in subsection (2) of this section.

2816330



WASHINGTON STATE DEPT OF  
**NATURAL  
RESOURCES**

## Forest Practices Application/Notification For Aerial Chemicals

For DNR Region Office Use Only	
FPA/N #:	2816330
Region:	NW
Received Date:	4-12-2018

**USE THE INSTRUCTIONS TO COMPLETE THIS APPLICATION. TYPE OR PRINT IN INK:**

**1. Landowner, Timber Owner, and Operator**

Legal Name of LANDOWNER	Legal Name of TIMBER OWNER	Legal Name of OPERATOR
Weyerhaeuser Company	same as landowner	same as landowner
Mailing Address: 500 Metcalf St, Building F-5E	Mailing Address:	Mailing Address:
City, State, Zip Sedro-Woolley, WA 98284	City, State, Zip	City, State, Zip
Phone ( 360 ) 424-2014	Phone ( )	Phone ( )
Email: emily.conklin@weyerhaeuser.co	Email:	Email:

**2. Contact person.**

RECEIVED NW REGION

Contact Person: Emily Conklin	Phone ( 360 ) 424-2014 APR 12 2018 Email: emily.conklin@weyerhaeuser.com
----------------------------------	--

**3. Are you substituting prescriptions from an approved state or federal conservation agreement or watershed analysis?**

☒ No. ☐ Yes. Write "Using prescriptions" in tables that apply. Attach or reference prescriptions/crosswalk on file.

**4. Complete the following property description:**

Unit Number	Acres	Section	Township	Range	East/West	County
see attachment						
11480	53.1	29,32	26	12	E	King
12490	23	13	26	11	E	"
14461	69.9	28,29	27	9	E	Snohomish



**6. Is this proposal: (Answer every question)**

- a. ☒ No. ☐ Yes. Within the city limits or an urban growth area? *If Yes, include SEPA Environmental Checklist or SEPA Determination or approved 10-year management plan*
- b. ☒ No. ☐ Yes. Within a public park? *If Yes, include SEPA Environmental Checklist or SEPA Determination*
- c. ☒ No. ☐ Yes. Within 500 feet of a public park? Park name: \_\_\_\_\_
- d. ☒ No. ☐ Yes. For an Alternate Plan? *If yes, include a copy of the Alternate Plan*
- e. ☒ No. ☐ Yes. Using a chemical that is not registered or for a use that is not allowed under the label? *If yes, include a copy of your Experimental Use Permit and a SEPA Environmental Checklist*
- f. ☒ No. ☐ Yes. Applying a pesticide in a Type A or Type B Wetland? *If Yes, include a SEPA Environmental Checklist or SEPA Determination*

**7. Are you spraying 240 or more contiguous acres? If Yes, include a SEPA Environmental Checklist.**

☒ No. ☐ Yes.

**8. Have you reviewed this forest practices activity area to determine whether it may involve historic sites and/or Native American cultural resources? Read the instructions before answering this question.**

☒ No. ☐ Yes.

**9. Additional Information (Attach additional pages if necessary):**

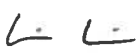
2816380

**10. We acknowledge the following:**

- The information on this application/notification is true.
- We understand this proposed forest practice is subject to:
  - The Forest Practices Act and Rules AND
  - All other federal, state or local regulations.
- Compliance with the Forest Practices Act and Rules does not ensure compliance with the Endangered Species Act or other federal, state or local laws.
- The following may result in an unauthorized incidental take of certain endangered or threatened fish species:
  - Inadvertent Discovery – Chapters 27.44, 27.53, 68.50 and 68.60 RCW
  - If you find or suspect you have found an archaeological object or Native American cairn, grave, or glyptic record, immediately cease disturbance activity, protect the area and promptly contact the Department of Archaeology and Historic Preservation at 360 586-3077.
  - If you find or suspect you have found human skeletal remains, immediately cease disturbance activity, protect the area, and contact the County Coroner or Medical Examiner and local law enforcement as soon as possible. Failure to report human remains is a misdemeanor.

We understand that applying chemicals is not an activity included as part of the DNR's Incidental Take Permit for aquatic species. We affirm that the information contained herein is true, and understand that this proposed forest practice is subject to the Forest Practices Act and Rules as well as all other federal, state or local regulations. Compliance with the Forest Practices Act and Rules does not ensure compliance with the Endangered Species Act or other federal, state or local laws.

The landowner understands that by signing and submitting this FPA, he/she is authorizing the Department of Natural Resources to enter the property in order to review the proposal, inspect harvest operations, and monitor compliance for up to three years after its expiration date. RCW 76.09.150

<b><u>Signature of LANDOWNER</u></b>   <b><u>Print Name:</u></b> Emily Conklin  <b><u>Date:</u></b> 4/12/18	<b><u>Signature of TIMBER OWNER</u></b> (If different than landowner)   <b><u>Print Name:</u></b>   <b><u>Date:</u></b>	<b><u>Signature of OPERATOR</u></b> (If different than landowner)   <b><u>Print Name:</u></b>   <b><u>Date:</u></b>
---	--	--

2816330 =

Question 4.

UNIT NUMBER	ACRES	SECTION	TOWNSHIP	RANGE	EAST/WES	COUNTY
11480	53.1	29, 32	26	12	E	King
12490	23.0	13	26	11	E	King
14461	69.9	28,29	27	9	E	Snohomish
TOTAL	146.0					

2816330

1

Question 5.

Unit Identifier	Acres Treated	Active Ingredient	EPA Number by Active Ingredient	Are you spraying within:			Site Prep (Anticipated Year)	Spring Conifer Release (Anticipated Year)	Fall Conifer Release (Anticipated Year)
See question 4 for unit information.				100 feet of agricultural land?	200 feet of a residence?	100 feet of surface water?			
Potentially all units	146	deposition aid	WA5905-1503	No	No	Yes		2018	
Potentially all units	146	Atrazine	35915-4-60063	No	No	Yes		2018	
Potentially all units	146	clopyralid	62719-259	No	No	Yes		2018	
Potentially all units	146	hexazinone	432-1576 *	No	No	Yes		2018	
Potentially all units	146	indaziflam	432-1517	No	No	Yes		2018	
Potentially all units	146	deposition aid	WA5905-13001	No	No	Yes		2018	

2816330



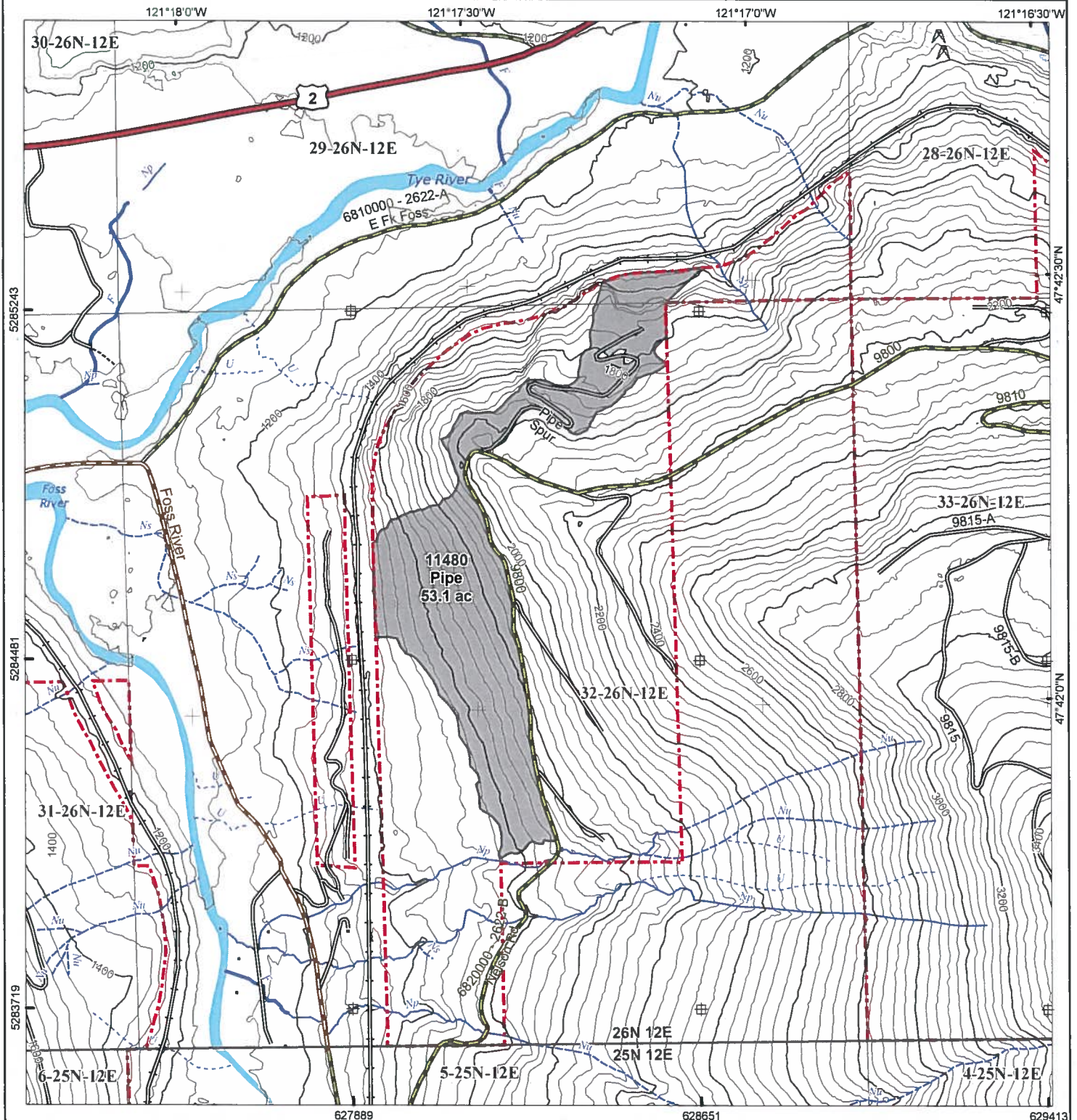


North Washington Region  
North Cascades Area  
Skagit District  
Foss Tract

### Siteprep Spray Unit

47°42'08"N 121°17'32"W  
Elevation 1727 ft

T26N R12E sec 29  
King County  
Stand Key: 1995325472  
DNR PPF Region: Skykomish



MU Code: 11480  
MU Desc: Pipe  
53.1 Net Ac

- Siteprep Unit
- WY Property Line
- Type S; F Stream
- Type Np Stream
- Type Ns; Nu Stream
- Type X; U Stream
- 40ft Contours WA

2816330

Scale 1 in = 1000 ft 0 500 1,000 1,500 2,000 Feet

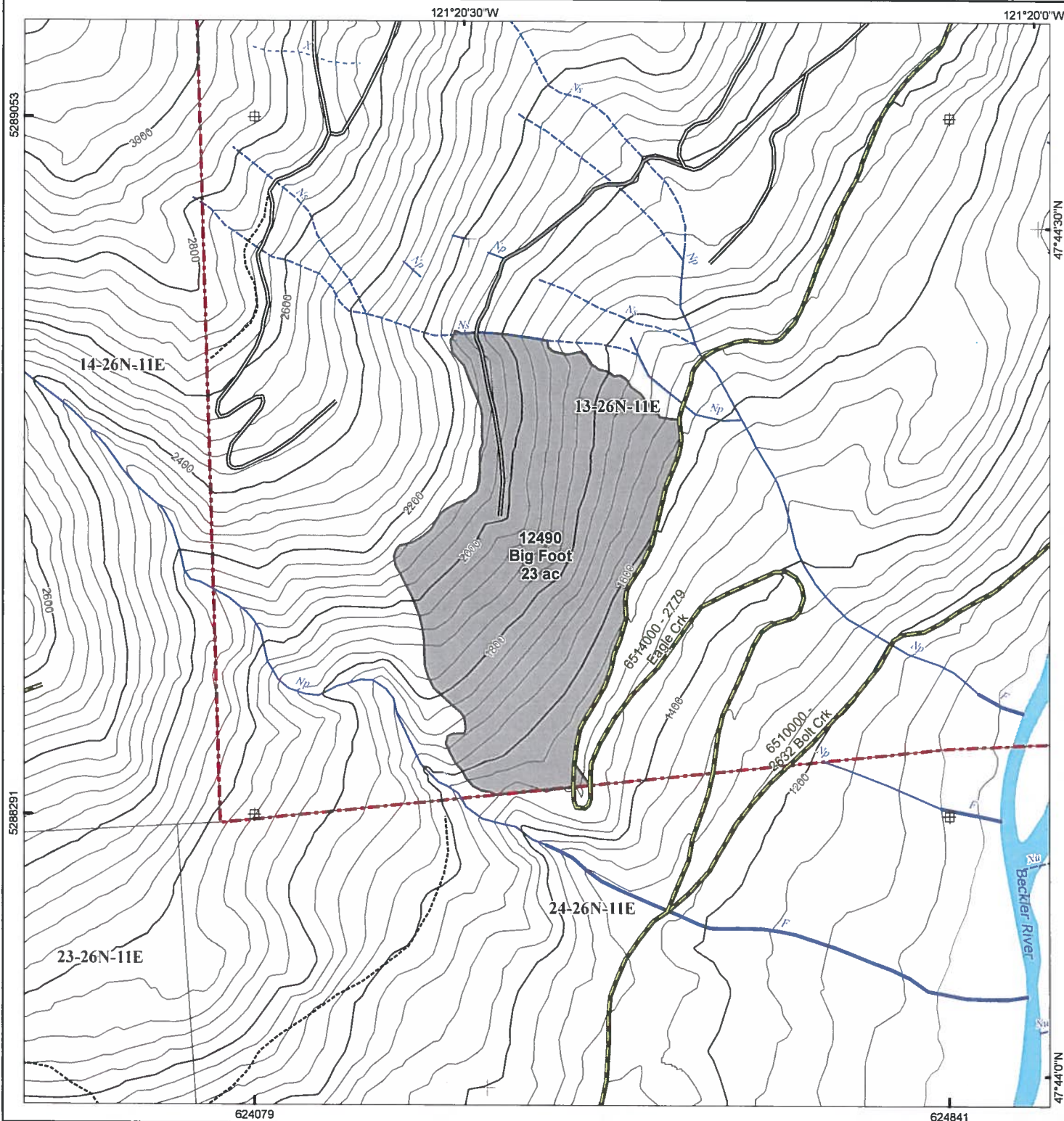
4/3/2018



North Washington Region  
North Cascades Area  
Skagit District  
Beckler Tract

Siteprep Spray Unit  
47°44'19"N 121°20'27"W  
Elevation 1784 ft

T26N R11E sec 13  
King County  
Stand Key: 1995349596  
DNR FPF Region: Skykomish



MU Code: 12490  
MU Desc: Big Foot  
23 Net Ac

2816330

- Siteprep Unit
- WY Property Line
- Type S; F Stream
- Type Np Stream
- Type Ns; Nu Stream
- Type X; U Stream
- 40ft Contours WA

Scale 1 in = 500 ft

0 500 1,000 1,500 2,000 Feet

4/3/2018

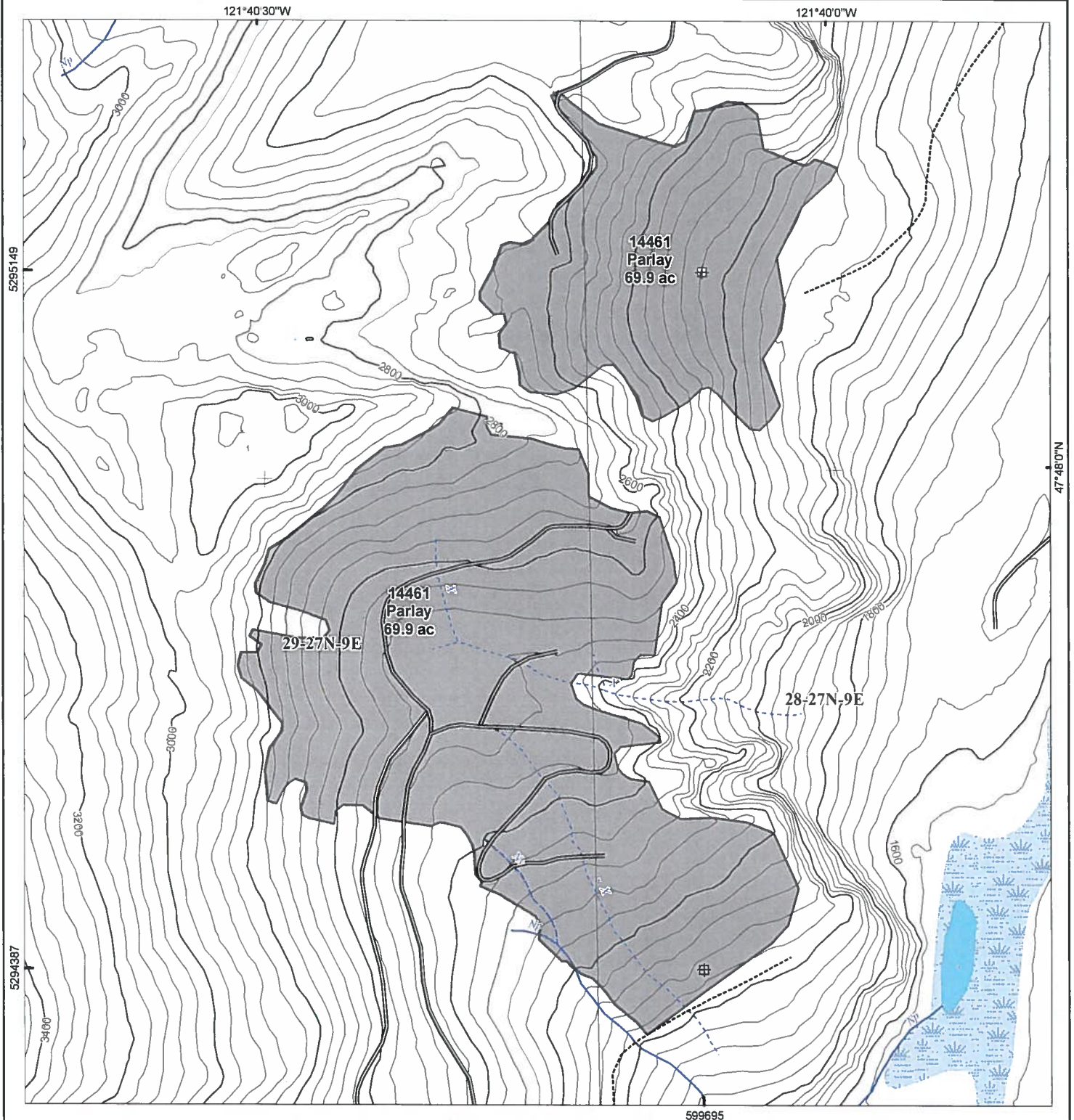




North Washington Region  
North Cascades Area  
Skagit District  
Proctor Creek Tract

Siteprep Spray Unit  
47°47'52"N 121°40'18"W  
Elevation 2491 ft

T27N R09E sec 29  
Snohomish County  
Stand Key: 1995324871  
DNR FPF Region: Skykomish



MU Code: 14461  
MU Desc: Parlay  
69.9 Net Ac

2816330

- Siteprep Unit
- WY Property Line
- Type S; F Stream
- Type Np Stream
- Type Ns; Nu Stream
- Type X; U Stream
- 40ft Contours WA

Scale 1 in = 500 ft 0 500 1,000 1,500 2,000 Feet

4/3/2018



Forest Practices Application/Notification  
**Notice of Decision**

FPA/N No: 2816330  
Effective Date: 4/27/2018  
Expiration Date: 4/27/2021  
Shut Down Zone: \_\_\_\_\_  
EARR Tax Credit: ☐ Eligible ☒ Non-eligible  
Reference: Skykomish Spray  
\_\_\_\_\_  
\_\_\_\_\_

**Decision**

- ☐ **Notification** Operations shall not begin before the effective date.  
☒ **Approved** This Forest Practices Application is subject to the conditions listed below.  
☐ **Disapproved** This Forest Practices Application is disapproved for the reasons listed below.  
☐ **Closed** Applicant has withdrawn FPA/N.

**FPA/N Classification**

☐ Class II ☒ Class III ☐ Class IVG ☐ Class IVS ☐ 4 years ☐ 5 years

**Number of Years Granted on Multi-Year Request**

**Conditions on Approval / Reasons for Disapproval**

Notify the Department of Natural Resources at least 48 business hours before beginning operations of each unit to be sprayed. Call (360) 856-3500 for Forest Practices and the Skykomish Forest Practice Forester and provide the application number and legal description of your operation.

**FOR YOUR INFORMATION:**

Aerial chemical application areas need to be posted by the landowner by signing at significant points of regular access at least 5 days prior to treatment. Posting shall remain at least 15 days after the spraying is complete.

Issued By: Steven Huang *S. H.* Region: Northwest  
Title: Skykomish Forest Practice Forester Date: 4/26/2018  
Copies to: ☒ Landowner, Timber Owner and Operator.  
Issued in person: ☐ Landowner ☐ Timber Owner ☐ Operator By: \_\_\_\_\_

### **Appeal Information**

You have thirty (30) days to appeal this Decision and any related State Environmental Policy Act determinations to the Pollution Control Hearings Board in writing at the following addresses:

**Physical address: 1111 Israel Rd. SW, Ste 301, Tumwater, WA 98501**

**Mailing address: P.O. BOX 40903, OLYMPIA, WA 98504-0903**

Information regarding the Pollution Control Hearings Board can be found at: <http://www.eluho.wa.gov/>

At the same time you file an appeal with the Pollution Control Hearings Board, also send a copy of the appeal to the Department of Natural Resources' region office and the Office of the Attorney General at the following addresses:

Office of the Attorney General  
Natural Resources Division  
1125 Washington Street SE  
PO Box 40100  
Olympia, WA 98504-0100

And

Department Of Natural Resources  
Northwest Region  
919 N Township St  
Sedro-Woolley WA 98284

### **Other Applicable Laws**

Operating as described in this application/notification does not ensure compliance with the Endangered Species Act, or other federal, state, or local laws.

### **Transfer of Forest Practices Application/Notification (WAC 222-20-010)**

Use the "Notice of Transfer of Approved Forest Practices Application/Notification" form. This form is available at region offices and on the Forest Practices website: <http://www.dnr.wa.gov/businesspermits/forestpractices>. Notify DNR of new Operators within 48 hours.

### **Continuing Forest Land Obligations (RCW 76.09.060, RCW 76.09.070, RCW 76.09.390, and WAC 222-20-055)**

Obligations include reforestation, road maintenance and abandonment plans, conversions of forest land to non-forestry use and/or harvest strategies on perennial non-fish habitat (Type Np) waters in Eastern Washington.

Before the sale or transfer of land or perpetual timber rights subject to continuing forest land obligations, the seller must notify the buyer of such an obligation on a form titled "Notice of Continuing Forest Land Obligation". The seller and buyer must both sign the "Notice of Continuing Forest Land Obligation" form and send it to the DNR Region Office for retention. This form is available at DNR region offices.

If the seller fails to notify the buyer about the continuing forest land obligation, the seller must pay the buyer's costs related to continuing forest land obligations, including all legal costs and reasonable attorneys' fees incurred by the buyer in enforcing the continuing forest land obligation against the seller.

Failure by the seller to send the required notice to the DNR at the time of sale will be prima facie evidence in an action by the buyer against the seller for costs related to the continuing forest land obligation prior to sale.

### **DNR affidavit of mailing:**

On this day <u>4/27/2018</u> , I placed in the United States mail at <u>Sedro-Woolley</u> , WA,
(date) (post office location)
postage paid, a true and accurate copy of this document. Notice of Decision FPA # <u>2816330</u>
<u>L Utgard</u>
(Printed name) (Signature)



FPA/N No: 2816330

Date of Service: 06/06/2018

Request to Amend  
Forest Practices Application/Notification

Reference: Skykomish Spray

## DNR's Decision

### Decision

- ☒ **Approved** This request for an amendment is approved and subject to the conditions listed below
- ☐ **Disapproved** This request for an amendment is disapproved for the reasons listed below

### Conditions on Approval/Reasons for Disapproval

No additional condition

### Appeal Information (RCW 76.09.090(3), WAC 222-46-030(4), and WAC 332-08-215(3))

The Landowner, Timber Owner, or Operator has 15 calendar days from the Date of Service to request a Brief Adjudicative Proceeding for this **amendment which is a Notice to Comply for an authorized deviation**. Appeal requests must:


- Be in writing
- Include signature(s)
- Include the factual basis for the appeal and the issue to be adjudicated
- Sent to the Region Office at Sedro-Woolley
- With a copy sent to the Department of Natural Resources, Forest Practices Division, PO Box 47012, Olympia, WA 98504-7012

Issued By: Steven Huang

Title: Skykomish Forest Practice Forester

Copies Sent To: Landowner (via US Mail), Timber Owner (via US Mail), Operator (via US Mail), WDFW, ECY, Affected Indian Tribes, LGE, other E-Mailed 6-6-18

**DNR affidavit of mailing:**

On this day 06/07/2018, I placed in the United States mail at Sedro-Woolley, WA,  
(date) (post office location)  
postage paid, a true and accurate copy of this Amendment Request Notice of Decision for FPA # 2816330  
L Utgard   
(Printed name) (Signature)



WASHINGTON STATE DEPT OF  
**NATURAL  
RESOURCES**

**Request to Amend Forest Practices  
Application/Notification**

For DNR Region Office Use Only

Region:

NW

Use this to request an amendment to an approved Western Washington, Eastern Washington, or Aerial Chemical Applications/Notifications

TYPE OR PRINT IN INK:

**1. Landowner, Timber Owner, and Operator Information**

<u>Legal Name of LANDOWNER</u> Weyerhaeuser Company	<u>Legal Name of TIMBER OWNER</u> same as landowner	<u>Legal Name of OPERATOR</u> same as landowner
Mailing Address: 500 Metcalf St, Building F-5E	Mailing Address:	Mailing Address:
City, State, Zip Sedro-Woolley, WA 98284	City, State, Zip	City, State, Zip
Phone ( 360 ) 424-2014	Phone (     )	Phone (     )
Email: emily.conklin@weyerhaeuser.co	Email:	Email:

2. Approved FPA/N Number 2816330

3. Describe the proposed amendment to the original FPA/N. You can attach revised pages of an FPA/N, or give specific details. Include a new Activity Map if you are proposing any changes to the original.

Withdrawal the use of Atrazine (EPA reg # 35915-4-60063) on all units within this FPA.

4. I affirm that the information contained herein is true, and understand that this proposed forest practice is subject to the Forest Practices Act and Rules, as well as all other federal, state or local regulations. Compliance with the Forest Practices Act and Rules does not ensure compliance with the Endangered Species Act or other federal, state or local laws. I understand this amendment is a request for a Notice to Comply for an authorized deviation as described in WAC 222-20-060.

5. L. L.

Landowner's Signature

05/25/2018

Date



## Revisions to FPA/N\_2816330\_\_\_\_\_

[illegible]



**Forest Practices Application/Notification  
NOTICE OF TRANSFER**

I/we transfer my/our rights, privileges, and obligations under this approved Forest Practices Application or Notification. I/we affirm that the information contained below is true and agree to comply with the rules authorized by the Forest Practices Act and be bound by all conditions on the approved application or notification.

FPA/N Number: 2816330 Section(s): SEFPA Township: \_\_\_\_\_ Range: \_\_\_\_\_

Original Landowner (Signature): LC LC

Original Landowner (Printed): Weyerhaeuser Company Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

<b>New Operator</b> – Complete this section <u>only</u> if you are: <input type="checkbox"/> Changing an operator for: <input type="checkbox"/> Road construction <input type="checkbox"/> Timber harvest <input type="checkbox"/> Aerial spray <input checked="" type="checkbox"/> Adding an operator for: <input type="checkbox"/> Road construction <input type="checkbox"/> Timber harvest <input checked="" type="checkbox"/> Aerial spray	
Legal Name of New Operator: (Print) <u>Wilbur Ellis</u> <u>Ricky Glen</u>	Mailing Address: <u>403 Coulson Road</u> <u>Chenais, WA 98538</u>
Phone: <u>360-790-0949</u>	
Email: <u>rglen@wilburellis.com</u>	
New Operator Signature: <u>Ricky Glen</u>	Date: <u>6/14/18</u>

<b>New Landowner</b> – Complete this section <u>only</u> if you are transferring your FPA to a new landowner <input type="checkbox"/> No <input type="checkbox"/> Yes Are you a small forest landowner per RCW 76.09.450 (if yes, continue to question below) <input type="checkbox"/> No <input type="checkbox"/> Yes Is your entire proposed harvest area on a single contiguous ownership consisting of one or more parcel(s)?	
Legal Name of New Landowner: (Print)	Mailing Address:
Phone:	
Email:	
New Landowner Signature:	Date:

<b>New Timber Owner</b> – Complete this section <u>only</u> if you are transferring your timber rights	
Legal Name of Timber Owner: (Print)	Mailing Address:
Phone:	
Email:	
Forest Tax Reporting Account Number: (Contact Dept. of Revenue at: 1-800-548-8829) <u>800 070 834</u>	
New Timber Owner Signature:	Date:

<input checked="" type="checkbox"/> Received by: <u>[Signature]</u>	Date: <u>6/28/18</u>
(DNR Forest Practices Staff Signature) 11/01/2017	